## 2001 UNIFORM BUSINESS REPORT (UBR)

## Aug 13, 2001 8:00 am Secretary of State DOCUMENT # |P9400034300 08-13-2001 90066 024 \*\*\*158.95 NCL, INC. Principal Place of Business Mailing Address 1305 MURRAY AVENUE 1305 MURRAY AVENUE CLEARWATER FL 33755 CLEARWATER FL 33755 US 3. Mailing Address 2. Principal Place of Business Suite. Apt. #. etc. Suite, Apt. #. etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3249158 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LOWERY, NANCY C. Street Address (P.O. Box Number is Not Acceptable) 1305 MURRAY AVE. **CLEARWATER FL 33755** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00: 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CR2E034 (10/00) TITLE ☐ Delete TITLE ■ Addition LOWERY, NANCY C NAME 1305 MURRAY AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **CLEARWATER FL 33755** CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition TITLE LOWERY, NORMAN C. NAME NAME STREET ADDRESS 1305 MURRAY AVE. STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP **CLEARWATER FL 33755** ☐ Change Admition TITLE ☐ 'Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Chanoe ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP City-St-ZIP

13. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or suppliemental report is flue and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 60%, Florida Statutes, and that my name appears in Block 11 or Block 12 if

changed, or on an attachment with an address, with all other like

SIGNATURE:

FILED

Attachment Doct 194100034300 B0011897

8-6-01

To whom it concerns,

I called & proke to Christia today & she

Said to senda note with this. I sent my

Click # 1/16 4-25-01 for 150 the Per my bank

it has never cleared & Tas now been stopped.

Enclosed please find copy of prior form

and new check. I have added 895 to

get a receipt of Status backethis time.

Hark Jo.

Mary Coloney

FE1 # 59-3249158

MCL, Sue.

1305 Murray Are.

Clw, Fl. 33755